

TO: JOANNA HUNTER

TITLE

STATE
CT. COORDINATORADDRESS: ~~5 POST OFFICE SQ, SUITE 100 MAIL CODE~~ 06061 BOSTON, MA 02109 3912

AGENCY: ENVIRONMENTAL PROTECTION AGENCY DATE 11-18-14

Pursuant to the Freedom of Information Act, 5 USC 552 and the Privacy Act of 1974, 5 USC 552a, and pursuant to the State Freedom of Information Act, C.G.S. § 200 through 1-241, I hereby request the following documents and/or copy (ies) thereof:

1. ANY AND EVERY INFORMATION CONCERNING THE RESULT OF LEAD LEVEL
 2. CONTAIN IN THE ENTRY POINT AT SOMERS BOILER ROOM CUSD 00702
 3. FOR (2008-09-10-11-12-13-14)
 4. ANY AND EVERY INFORMATION CONCERNING THE LEVEL OF
 5. ARSENIC CONTAIN IN THE ENTRY POINT SOMERS BOILER ROOM
 6. (CUSD 0072) FOR THE YEAR (2008-09-10-11-12-13-14)
 7. ANY AND EVERY INFORMATION CONCERNING WHY THE CORRECTIONAL
 8. INSTITUTE (PWS 049003) WAS NON COMPLIANT IN 8-27-12 AND WHAT
- WILL BE CONCLUDED SINCE THE FINDING OF LEAD & ARSENIC CONTAMINANT

If this request is denied either in whole or in part, please inform me as to the reason(s)-why.

If you do not grant this request either by compliance or denial, be informed that the laws of this State mandate that you have four (4) business days in which to respond. Failure to respond will be considered a denial on your part and subject to the Freedom of Information Commission decision on such failure and non-compliance.

Also be aware of the fact that deliberate denial, indifference to this request for production of said requested documents, or alternatively, refusal to inform as to the reasons for denial, could result in a Civil Penalty of a fine up to \$1,000.00, for such violation if Civil Penalty is requested by the undersigned requestor of said information.

I will ☒ I will not ☐ request Civil Penalty if you do not comply hereof.

I am unable to pay the cost of production and pursuant to statute, I hereby request waiver of production fees.

RESPECTFULLY SUBMITTED:

Ann O'Halloran Hilley INGINAC
#317624

State of Connecticut, County of Tolland; duly witnessed and/or sworn to before the undersigned Notary on the date of:

Date November 20, 2014

NOTARY:

Devonia M. Long
DEVONIA M. LONG
NOTARY PUBLIC
My Commission Expires 1/31/2019

10FA COPY